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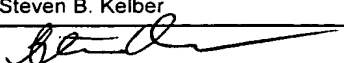
 U.S. PTO
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|---|--|---------------------------------------|--|
| UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small> | Attorney Docket No. | 5988-037-27 | |
| | First Inventor or Application Identifier | Yukio NISHIMURA et al. | |
| | Title | RADIATION-SENSITIVE RESIN COMPOSITION | |

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|---|---|
| APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents</small> | ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231 |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small> <input type="checkbox"/> Applicant claims small entity status. 2. <input checked="" type="checkbox"/> Specification Total Pages 73 3. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets 4. <input checked="" type="checkbox"/> Oath or Declaration Total Pages 3 a. <input checked="" type="checkbox"/> Newly executed (original) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. §1.63(d)) <small>(for continuation/divisional with box 16 completed)</small> 5. <input type="checkbox"/> Incorporation By Reference (usable if box 4B is checked) <small>The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4B, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</small> | ACCOMPANYING DOCUMENTS 6. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 7. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small> 8. <input type="checkbox"/> English Translation Document (if applicable) 9. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 10. <input type="checkbox"/> Preliminary Amendment 11. <input checked="" type="checkbox"/> White Advance Serial No. Postcard 12. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 13. <input checked="" type="checkbox"/> Request for Priority 14. <input type="checkbox"/> List of Inventors' Names and Addresses 15. <input checked="" type="checkbox"/> Other: Check in the amount \$780.00 |
| 16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no.: Prior application information: Examiner: Group Art Unit: | |
| 17. Amend the specification by inserting before the first line the sentence: <input type="checkbox"/> This application is a <input type="checkbox"/> Continuation <input type="checkbox"/> Division <input type="checkbox"/> Continuation-in-part (CIP) of application Serial No. Filed on <input type="checkbox"/> This application claims priority of provisional application Serial No. Filed | |
| 18. CORRESPONDENCE ADDRESS Supervisor, Patent Prosecution Services PIPER MARBURY RUDNICK & WOLFE LLP 1200 Nineteenth Street, N.W. Washington, D.C. 20036-2412 Telephone No. (202) 861-3900 Facsimile No. (202) 223-2085 | |

| | | | |
|-----------|------------------|------------------|------------------|
| Name | Steven B. Kelber | Registration No. | 30,073 |
| Signature | | Date | January 16, 2002 |
| Name | | Registration No. | |
| | | Telephone | 202-861-3900 |

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|--|----------|---------------------------|----------|--|----------------|------------------------------------|------------------------|--------------|----------|--|--------------------|-----|-----|------------------|----|
| FEE TRANSMITTAL | | | | | Docket No. | | 5988-037-27 | | | | | | | | |
| | | | | | Serial No. | | NEW PATENT APPLICATION | | | | | | | | |
| | | | | | Filing Date | | HEREWITH | | | | | | | | |
| | | | | | Inventor(s) | | Yukio NISHIMURA et al. | | | | | | | | |
| | | | | | Group Art Unit | | | | | | | | | | |
| TOTAL AMOUNT OF PAYMENT | | | | \$780.00 | | Examiner | | | | | | | | | |
| 1. <input type="checkbox"/> Applicant claims small entity status. <input checked="" type="checkbox"/> Charge any UNDERPAYMENT or credit any OVERPAYMENT in the indicated fees to Deposit Account No. 50-1442. <input type="checkbox"/> Charge the indicated fees to Deposit Account No. 50-1442. | | | | | | FEE CALCULATION (continued) | | | | | | | | | |
| | | | | | | 3. ADDITIONAL FEES | | | | | | | | | |
| | | | | | | Large Entity | | Small Entity | | Fee Description | | | | | |
| 2. <input checked="" type="checkbox"/> Check enclosed. | | | | | | Fee Code | Fee (\$) | Fee Code | Fee (\$) | | Fee Paid | | | | |
| | | | | | | FEE CALCULATION | | | | | | 105 | 130 | 205 | 65 |
| 1. BASIC FILING FEE | | | | | | 127 | 50 | 227 | 25 | Surcharge-late provisional filing fee or cover sheet | | | | | |
| | | | | | | 139 | 130 | 139 | 130 | Non-English specification | | | | | |
| Large Entity | | Small Entity | | Fee Description | | 147 | 2520 | 147 | 2520 | Ex parte reexam. fee | | | | | |
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | | Fee Paid | | | | | | | | | |
| 101 | 740 | 201 | 370 | Utility filing fee | | 740 | 115 | 110 | 215 | 55 | 1-mo. ext. of time | | | | |
| 106 | 330 | 206 | 165 | Design filing fee | | | 116 | 400 | 216 | 200 | 2-mo. ext. of time | | | | |
| 107 | 510 | 207 | 255 | Plant filing fee | | | 117 | 920 | 217 | 460 | 3-mo. ext. of time | | | | |
| 108 | 740 | 208 | 370 | Reissue filing fee | | | 118 | 1440 | 218 | 720 | 4-mo. ext. of time | | | | |
| 114 | 160 | 214 | 80 | Provisional filing fee | | | 128 | 1960 | 228 | 980 | 5-mo. ext. of time | | | | |
| SUBTOTAL (1) | | | | | | \$740.00 | 119 | 320 | 219 | 160 | Notice of Appeal | | | | |
| 2. EXTRA CLAIM FEES | | | | | | 120 | 320 | 220 | 160 | Appeal Brief | | | | | |
| | | | | | | 121 | 280 | 221 | 140 | Request for Oral Hearing | | | | | |
| tot. claims | | 14 | - | 20* | = | 0 | x | \$18 | = | 0 | | | | | |
| ind. claims | | 1 | - | 3* | = | 0 | x | \$84 | = | 0 | | | | | |
| <input type="checkbox"/> | | Multiple Dependent Claims | | | | \$280 | = | | | 143 | 460 | 243 | 230 | Design Issue Fee | |
| Large Entity | | Small Entity | | Fee Description | | 144 | 620 | 244 | 310 | Plant Issue Fee | | | | | |
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | | 122 | 130 | 122 | 130 | Petitions to the Commissioner | | | | | |
| 103 | 18 | 203 | 9 | Claims in excess of 20 | | 126 | 180 | 126 | 180 | IDS Submission | | | | | |
| 102 | 84 | 202 | 42 | Independent claims in excess of 3 | | 581 | 40 | 581 | 40 | Assignment | | 40 | | | |
| 104 | 280 | 204 | 140 | Multiple dependent claim, if not paid | | 179 | 740 | 279 | 370 | For Filing RCE | | | | | |
| 109 | 84 | 209 | 42 | *Reissue independent claims over original patent | | 169 | 900 | 169 | 900 | Expedited Design | | | | | |
| 110 | 18 | 210 | 9 | *Reissue claims in excess of 20 and over original patent | | OTHER (indicate below): | | | | | | | | | |
| SUBTOTAL (2) | | | | | | \$0.00 | | | | | | | | | |
| * or number previously paid, if greater; For Reissues, see above | | | | | | SUBTOTAL (3) | | | | | \$40.00 | | | | |

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|-----------|---|------------------|------------------|-----------|--------------|
| Name | Steven B. Kelber | Registration No. | | 30,073 | |
| Signature |  | Date | January 16, 2002 | Telephone | 202-861-3900 |
| Name | | Registration No. | | | |